



Wellbeing and climate change: The psychological consequences of flooding

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Abstract:

Poster Presentation. Agency is central to well-being. This fact is acknowledged by a wide variety of approaches to well-being that are otherwise often at odds with each other. Choice plays a fundamental role in classical utilitarianism and associated approaches in economics. It is also the case with Rawls' conceptualisation of justice as fairness, and the basic needs approach. It is no less the case with Amartya Sen's capabilities approach. Given such broad agreement from a wide variety of traditions, one might expect that limitations to agency, especially cognitive ones, would receive a great deal of attention. However, this is not the case. Reducing the burden of mental disorders is not one of the United Nations' Millennium Development Goals. Mental health is seldom mentioned in the World Bank/ 'country owned' Poverty Reduction Strategy Papers (PRSPs) which outline poor countries policies and priorities. The UN sustainable development indicators only include suicide as an indicator of mental health, and their data is incorrect (they state that there are 100,000 suicides a year, the WHO figure, see below, is 1 million). Whilst the United Kingdom sustainable development indicators have now added one for positive mental health (Warwick Edinburgh Well Being Scale), mental disorders are left out of the picture. All this is despite the severity of the problem, according to the World Health Organisation, 25 percent of the world's population suffer from mental or behavioural disorders at some stage during their lives . The Global Burden of Disease measures suggest that mental and neurological disorders account for 12.3 percent of the total Disability Adjusted Life Years (DALY) (one DALY is equal to one year of healthy life lost), they also account for 30.8 percent of years lived with a disability (YDL). Unipolar depressive disorders are the fourth highest cause of disability adjusted life years accounting for 4.4% well above malaria 2.7 percent and tuberculosis 2.4 percent. They were also the leading cause of years lived with a disability, namely 11.9 percent. An estimated 70 million people suffer from alcohol dependence, 24 million have schizophrenia, 1 million commit suicide, 10-20 million attempt it. If the assessments of the Intergovernmental Panel on Climate Change (IPCC) are correct, then global warming caused by human activity is almost certainly with us. If this is the case, the theme will dominate future agendas and debates including the field of development. What of the relationship between mental health and climate change? How will climate change affect this aspect of agency and well-being? This paper restricts itself to the case of flooding which is very likely to increase (greater than 90 percent). Flooding is already a huge global problem affecting an average of 140 million people a year, more than all the other disasters, natural and technological, put together. Despite this, the relationships between flooding and mental health have received little academic attention; it has been earmarked as an area in need of further research. This need is particularly pressing in developing countries

as so few studies have been undertaken there. After outlining the current importance of mental health, this paper provides a critical review of the existing literature extending and updating that provided by the IPCC (2007), and details the limitations of current research. Despite limitations, all the literature, irrespective of methodology, points to two conclusions. Firstly, flooding increases the cases of mental disorders (common mental disorders (anxiety and depression), Post Traumatic Stress Disorder (PTSD) and suicide). Secondly, there are 'mediating factors'.

Source: <http://dx.doi.org/10.1088/1755-1307/6/4/142018>
http://iopscience.iop.org/1755-1315/6/14/142018/pdf/1755-1315_6_14_142018.pdf

Resource Description

Communication:

resource focus on research or methods on how to communicate or frame issues on climate change; surveys of attitudes, knowledge, beliefs about climate change

A focus of content

Communication Audience:

audience to whom the resource is directed

Policymaker, Researcher

Exposure :

weather or climate related pathway by which climate change affects health

Extreme Weather Event

Extreme Weather Event: Flooding

Geographic Feature:

resource focuses on specific type of geography

None or Unspecified

Geographic Location:

resource focuses on specific location

Global or Unspecified

Health Impact:

specification of health effect or disease related to climate change exposure

Mental Health/Stress

Mental Health Effect/Stress: Stress Disorder

Mitigation/Adaptation:

mitigation or adaptation strategy is a focus of resource

Adaptation

Climate Change and Human Health Literature Portal

Population of Concern: A focus of content

Other Vulnerable Population: People with mental disorders

Resource Type: 

format or standard characteristic of resource

Review

Timescale: 

time period studied

Time Scale Unspecified

Vulnerability/Impact Assessment: 

resource focus on process of identifying, quantifying, and prioritizing vulnerabilities in a system

A focus of content